



SEX SEER AS PERSONAGE FOR MEA ARB DISTY FOR MOMEN

Sexuality is driven by gendered power play on consent, pleasure and performance, and influences decision-making around contraception and family planning

CONTEXT

Moments of intimacy, emotional and physical, go a long way in shaping the couple dynamic. Women and men view sex and intimacy differently, and their sexual expressions are varied as well. Such gendered notions of intimacy evolve, and different expressions begin to emerge. Evidence informs us that sexual behavior is deeply intertwined with couples' contraceptive choices and uptake, and hence needs to be explored.

This thematic brief provides evidence from global literature and our primary research in Uttar Pradesh and Bihar on how women and men perceive sex within the ambit of marriage. It also explores the interplay of consent, pleasure and performance with contraceptive and family planning choices of the couple. Unpacking these will enable researchers and programmers in the family planning landscape to have a layered understanding of the intimate space of the couple and how their perception of sex shapes their family planning choices.

HOW THIS THEME WAS EXPLORED

The study participants, women and men, were asked a series of questions around their sexual behavior, expression and practices to understand the initiations and negotiations that take place between them. We also explored the bearing that their sexual behavior may have on their contraceptive behavior and choices.

Through this theme, we try to understand how women and men perceive sex and the manifestation of power dynamics around consent and pleasure. For building initial rapport to broach this domain, we used visual metaphor elicitations and conducted social network mapping exercises.



KEY INSIGHTS

Gender role-play is a building block of "couple-making" and influences sexual expression and behavior of couples.

Studies suggest that "couple-making" takes place throughout a couple's life; however, initial years as a couple shape their relationship and define the extent to which they may apply gender-based cultural scripts in it (Mbweza, 2008; Osei, 2014). Couple-making refers to the various stages of a couple's life, from the early phase to childbearing to gradually progressing in their relationship and reproductive trajectory. Literature informs that couples look for windows of time to interact with each other and share their emotional states "in the bedroom," or when they are together "out for the evening" in the absence of family members such as elders or children (Rimal et al., 2015; Wegs et al., 2016).

I know that she likes chowmein so I get it on my way back from work. Similarly, she knows that I like biryani and cooks it for me when I am home. Sometimes, to please her, I also help in cooking. That helps both of us.

MAN, PARITY 2, PURNEA

(Inter-caste love marriage; married for six years, with a three-year-old son and a two-year old daughter)

I know she likes Coke and rasgulla, and she knows all that I like. When I come back home, I give her my phone so that she can talk to her mother. I have stopped eating tobacco as I don't want my teeth to be black now that I am married.

MAN, PARITY 0, PURNEA (Three months of arranged marriage, no child)

Findings from our primary research in UP and Bihar indicate that couples, in the initial stages of their relationship, show love and care in many non-verbal ways such as hand-holding, stroking their partner's arm, the woman bringing a glass of milk at night for her husband, the man fetching his partner's choice of delicacies while returning home from work, and sharing screen time on a mobile phone that usually the man owns. They believed in developing these intimacies as a good grounding for their relationship, and sex follows afterwards.

These gendered notions of intimacy evolve, and different expressions emerge as couples attain more stability in their relationship with birth of children and duration of marriage. It was observed that while these intimacies and gestures were more prominent among younger couples (20-25 years), it was not the case among older couples. In few cases, though, for older couples too, these notions eased out and evolved, as women gain more voice in the household and men begin to

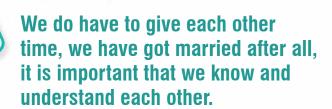
actively support in cooking and childcare activities. In most cases, it became harder as men stuck to their rigid beliefs of masculinity and took all decisions solely by themselves with women's role limited to childcare and household responsibilities. Literature (Osei, 2014; Snow et al., 2013) and our primary research, thus, both suggest that playing of these assigned gender roles influence sexual behavior, expression and contraceptive decisions differently at various life stages.

Findings from field sites also highlight that in relationships where emotional intimacy is higher, men display consideration for their partner's health but may still be unwilling to use any contraceptive method themselves. They may relent and change their sexual behavior based on their couple dynamic. For instance, if the couple has considerable emotional intimacy and healthy spousal communication¹¹, men pay heed when their partners say "no" to physical intimacy. In case the couple dynamic is strained, men do not alter their sexual behavior. Rather, they demand frequent sex and reject the use of a modern contraceptive for themselves and their partner. In

If I want to have sex, I tell her. If she says no, then I agree and we do not do it. We are not animals; we talk about these things and reach an agreement.

MAN, PARITY 1, BEGUSARAI (Married for three years with a one-year-old son)

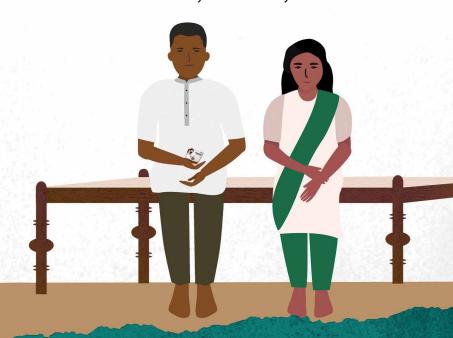
such cases, women are forced to bear the direct consequences of unprotected sex. Not having these intimacies or shared moments reveal a lack of mutuality — be it in sex, decision-making or healthcare.



MAN, PARITY 1, PURNEA (Married for two years; with a one-year-old daughter)

Women and men perceive sex and sexuality differently; women perceive it as a duty, while for men it is a need to "perform" and exhibit their sexual prowess.

Literature suggests that despite normative restrictions, women find ways of communicating about sex and sexuality to their husbands. These conversations may be initiated by men but





He only initiates it, I like it but also find it repulsive at the same time.

WOMAN, PARITY 1, GORAKHPUR (RURAL) (Married for two years, with a son)

women do try and make space for their expression (Montesi et al., 2011). Evidence highlights that for some men, especially urban men, it seems acceptable for their wives to talk about sex, and express sexual desire (McDougall et al., 2011). Men seem to want more engagement from their wives, which increases their sexual access. It is perceived that when couples communicate more frequently and effectively about sex, both verbally and non-verbally, husbands' preferences may become a resource for women to draw upon as they exercise sexual agency (ibid) for other domains as well. In many cases, sexual negotiations precede contraceptive negotiations and both critically influence the couple's perspective around family planning.

We talk about all this (sex), if I say no, he understands and agrees. When I have my periods, I also tell him that please do not touch him and he keeps distance.

WOMAN, PARITY 0, PURNEA (Married for two years; no children) Our primary research shows that women have a complex and bittersweet relationship with sex. They enjoy engaging in intimate contact and gestures associated with seduction such as touching, massaging, teasing, humor, sharing closeness in bed, etc., but some may not necessarily enjoy the act of penetration.

Sex is also seen as a normative act which is carried out to ensure the well-being and maintain the status quo of a relationship. Several women felt bound by duty, as wives, to have sex even when they did not want it or enjoy it. There were also instances where women felt repulsed by the act of sex, considering it "dirty", and internalizing the idea that "good women neither initiate nor enjoy sex".



Good women do not initiate sex; they just give some hint and the man understands. Men feel like doing it (sex) everyday but we do not.

WOMAN, PARITY 2, BEGUSARAI (Married for eight years; with two daughters)

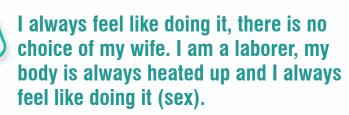
Further, many women feared that if they did not comply with the husband's desire to have sex, their fidelity would be put to question. In most of these cases, consent is considered implicit, wherein anything apart from a firm "no" was considered a "yes", including silence. As such, even though the couples may not have the language for consent, respecting their partner's desires became a parameter of understanding consent within marriage. This burden of respecting their partners desires usually fell on the women as they were bound by "duty" to fulfill the needs of their partner. Although, in some young couples, who had either married out of their choice or were educated, the women's needs and desires also held weight and prominence.

Men's sexual expression was also observed to be an extension of how they felt in other spheres of their life — as providers and protectors — and was evaluated based on performanceⁱⁱⁱ. It was observed to be more overt but largely articulated in terms of an act that they perform to satisfy their physical need to have sex. We noticed a conspicuous absence of articulation around pleasure in men's narratives as they leaned more toward the physical drive of the act in our primary research.

Have not stopped myself from having sex ever, if she is in the unsafe period then I use a condom but I never stop myself.

MAN, PARITY 0, PURNEA (Married for one year)

The sexual pleasure narrative of a man is largely determined by how he evaluates himself as a performer in a sexual act. As performers, men are cognizant of the gendered power dynamics at play and it is imperative to understand that for men, sex is more power driven than pleasure driven. This need for performance, sometimes, is also apparent when stretched to the domain of a woman's pleasure. Men take the physical responsibility to stimulate their female partner to orgasm, and the lack of it is a hit on their pride. This, sometimes, coupled with exposure to pornography and informal sources of messaging on sexuality reinforces that they as men have to perform physically than otherwise.



MAN, PARITY 3, GORAKHPUR (URBAN)

(Married for eight years; with a five-year-old son, a four-year-old daughter and a daughter less than a month old)

Men's need to perform sexually also drives them to control the process but they may not be able to control the outcome.

Literature suggests that perceptions and conditioning with respect to masculinity play out in a dual manner. While they accord a superior social status to men, they also pressure men to fulfil a range of social expectations. In case of unmarried men, peerpressure encourages them to engage in risky sexual behavior— for instance, having multiple sexual partners is often seen as a sign of male virility — and those who do not fulfil these expectations are ridiculed (Krugu et al., 2018; Schensul et al., 2015). Married men too are pressured to prove their virility by playing their role as a procreator. Men evaluate themselves based on specific markers of masculinity and an inability to perform up to these notions becomes a cause of distress for them (Khan et al., 2008). Taking on the role of a performer in various ways, men struggle to find balance between obsession and passion, as physical and emotional beings, and it thus is imperative to understand how sexuality is constructed in their minds. Since performance weighs on their mind, so does its responsibility. Extending their role in the intimate space as pleasuregivers, men view women's pleasure as an achievement of their masculinity and experience performance anxieties if they are unable to pleasure them (Chadwick & van Anders, 2017).



Control is the best, if I will not do it then who will. I am the man and hence I will control.

MAN, PARITY 1, PURNEA

(Married for six years, with a three-year-old daughter)

Findings from our primary research inform that constructs of "rule and control" are deeply ingrained in the sexual lives of couples^{iv}. Men trust in their ability to control sexual urges on "unsafe or fertile" days, ability to physically withdraw and control ejaculation, and like to be in-charge of preventing impregnation.

He tells me to trust him, that he will handle it. He tells me that he will not let it fall inside (ejaculate) and that he will withdraw at the right time.

WOMAN, PARITY 1, GORAKHPUR (URBAN) (Married for two years, with a one-year-old son)

In fact, men are able to assure and instill trust in women that they can rely on them when it comes to control. Withdrawal, in particular, is perceived to require timely deftness during intercourse and these skills "indicate" male sexual prowess according to them. The methods allow self-initiation, self-

regulation, communion and dynamic choice that enable men (and in some cases women) to enjoy and exercise perceived control over outcomes. Men's perceived control over their sexual drive and their ability to be self-sufficient does not always play out well as there is always a risk of performance failure, which can be driven by passion, the need for "release of tension" resulting in their inability to control the process and hence the outcome. Couples exist on a spectrum of control – while there is an attempt of complete control in the form of abstinence, partial control is exhibited where the couple may sleep separately for a brief period, and there is control based on convenience, where men take the initiative to withdraw and ejaculate outside.



The second child happened by mistake; I could not control myself. My wife got pregnant and our daughter was born.

MAN, PARITY 2. BEGUSARAI

(Married for five years, with a four-year-old daughter and a one-year-old son)

Further, disjointed and threadbare knowledge^v of safe and unsafe period puts the couple, especially women, in a precarious position. The men and women, across our field sites, narrated different as well as misinformed understanding of their window of risk. Further, in case of withdrawal, men do not consider the chance of pre-ejaculation and gather trust of their partner to depend on their ability to control, which too fails many times.

SPECTRUM OF RESPONSES

At an individual level, more than half of the women in the sample did convey enjoying sex though they spoke of sometimes initiating it. Women who did not enjoy sex also spoke of a low sexual drive and that they could manage things on their own and did not need a method as the couple did not feel like having sex. This was not true in case of their partners, as most of the men wanted to have sex. However, younger men spoke about being more accommodating to their wife's needs and desire to not have sex. These men were also mostly from nuclear families. Education did not have a significant bearing on this insight.

Further, there were younger men or couples who knew each other from before marriage who displayed more equitable and considerate behavior when it came to recognizing their partner's choice and interest in sex. Almost all couples in our sample had at least one unplanned pregnancy and, in six cases, two or more unplanned pregnancies.

EOVID-19 IMPACT

In light of the COVID-19 pandemic, we see patterns of reverse migration, economic distress and gender-based violence emerging. In such a situation, it is important to see if any of the above findings assume a different meaning and what would be the implications for family planning programs. For instance, the lockdown and the availability of men at households may impact "couple-making" and sexual behavior differently as compared to a pre-COVID-19 scenario. The lockdown experience of sexuality and sexual behavior may have family planning implications and the situation may intensify men's need to play the role of a provider. In the near future, new challenges would emerge for young couples and their relationship dynamic as men face pressures to perform and women experience a restrained physical and emotional space.

Further, as narratives and reports of increasing unplanned pregnancies, unsafe abortions and lack of access to contraceptives emerge, there is an urgent need to understand the changing couple dynamic, and women's and men fertility aspirations. To this effect, ICRW conducted a rapid research to understand the changes that COVID-19 has brought to the family planning landscape.



PATHWAYS TO ABBRESS THE BARRIER

Presence of moments of intimacy across a young couple's marital timeline are building blocks for their relationship and potential intervention points. Some of the pathways to enhance intimacies and address gendered sexuality as follows:

- Link increased sexual pleasure to positive sexual behavior for both men and women.
- Delink the pressure of performance from the act of sex, hence providing a release to men from viewing sex as a performance-driven act.
- Discourage men to rely on their masculinity and, instead, on effective checks and balances during the act of sex to prevent unplanned pregnancies.
- Provide alternatives to gendered notions of "couple-making".
- Encourage men to control the outcome, which is, responsible spacing and limiting than controlling the process (of sex).
- Promote strategies among women to navigate through the pressures of being a "dutiful" wife within the act of sex and family planning.
- Promote sex positive behaviors among couples by bolstering the underlying connection between adherence to modern contraceptives and increased pleasure by providing the opportunity for uninhibited sex and potentially higher sexual frequency.
- Provide men opportunities to evaluate their sexual behaviors and their unforeseen/unintended consequences on their partner and enable them to course-correct.

ENDNOTES:

- i Couple dynamic: It is marked by levels of intimacy (both emotional and physical) and the nature of communication (fearful or confident) between two partners which defines the quality of their relationship.
- **ii** Spousal communication: Communication between two intimate partners, the quality of which is determined by the presence/absence of conflict, emotional intimacy.
- iii Please refer to Thematic Barrier Brief One: Inequitable Gender Norms.
- iv Please refer to Thematic Barrier Brief One: Inequitable Gender Norms.
- v Please refer to Thematic Barrier Brief Four: Ever-widening Knowledge Gap.
- vi ICRW conducted a rapid qualitative study to understand the impact of COVID on family planning needs of women and men and its implications on engaging young men and couples in family planning in Uttar Pradesh and Bihar. Please refer to Nanda, S. et al. (2020). Family Planning in Times of COVID-19 A Remote Qualitative Study in Uttar Pradesh and Bihar. Research Brief. New Delhi: International Center for Research on Women.

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